

AF 11617 *zpw*



Atty. Dkt. No. 060925-1900

**THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: H. Michael SHEPARD

Title: METHODS TO TREAT  
AUTOIMMUNE AND  
INFLAMMATORY  
CONDITIONS

Appl. No.: 10/051,320

Filing Date: 1/18/2002

Examiner: Kim, Jennifer M.

Art Unit: 1617

<p align="center"><b>CERTIFICATE OF MAILING</b></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.</p> <p align="center">_____ Esther Lily C. Esguerra (Printed Name)</p> <p align="center"><i>[Signature]</i> (Signature)</p> <p align="center">_____ December 27, 2005 (Date of Deposit)</p>
---

**AMENDMENT TRANSMITTAL**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an amendment in the above-identified application.

[ X ] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a previous assertion of Small Entity status.

[ X ] The fee required for additional claims is calculated below:

	Claims As Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	18	-	22	=	0	x	\$50.00	=	\$0.00
Independent Claims:	3	-	3	=	0	x	\$200.0	=	\$0.00
							0		
First presentation of any Multiple Dependent Claims:		+					\$360.0	=	\$0.00
							0		
CLAIMS FEE TOTAL									= \$0.00

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872. If any extensions of time are needed for timely acceptance of papers submitted herewith, applicant hereby petitions for such extension under 37 C.F.R. §1.136 and authorizes payment of any such extensions fees to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: December 27, 2005

By



FOLEY & LARDNER LLP  
Customer Number: 38706  
Telephone: (650) 251-1129  
Facsimile: (650) 856-3710

Antoinette F. Konski  
Attorney for Applicant  
Registration No. 34,202



Atty. Dkt. No. 060925-1900

**THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: H. Michael SHEPARD

Title: METHODS TO TREAT  
AUTOIMMUNE AND  
INFLAMMATORY  
CONDITIONS

Appl. No.: 10/051,320

Filing Date: 1/18/2002

Examiner: Kim, Jennifer M.

Art Unit: 1617

<p><b>CERTIFICATE OF MAILING</b></p> <p>I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date below.</p> <p>_____ Esther Lily C. Esguerra (Printed Name)</p> <p>_____ (Signature)</p> <p>_____ December 27, 2005 (Date of Deposit)</p>
--

**AMENDMENT AND REPLY UNDER 37 CFR 1.116**

Mail Stop AF  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This Communication is responsive to the Final Office Action dated November 16, 2005, issued by the U.S. Patent and Trademark Office in connection with the above-identified application. A response to this Action is due February 16, 2006. Accordingly, this Response is timely filed.

Applicant does not request any amendment to the claims. Accordingly, a Listing of the Claims is not required. The Remarks begin on page 2 of this document.